

CLAIMS ONLY

Application Number

101748084

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
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17						
18						
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21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32	1					
33		1				
34			1			
35				1		
36					1	
37						1
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep	2					
Total Depend	2					
Total Claims	4					

	Indep	Depend	Indep	Depend	Indep	Depend
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
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89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
Total Indep						
Total Depend						
Total Claims						

2

2

4